Case 19-13029-mdc Doc 19 Filed 07/10/19 Entered 07/10/19 06:44:49 Desc Main Document Page 1 of 2

Fill	in this information to identify your c	ase:				1					
	otor 1 Thomas H.				_						
	otor 2										
Uni	ted States Bankruptcy Court for the	EASTERN DISTRICT	OF PENNSYLVANIA	A							
Cas	se number 19-13029					Check if this is:					
(If kr	nown)		-			An amende	d filing				
								wing postpetition e following date:			
0	fficial Form 106l					MM / DD/ Y	YYY				
S	chedule I: Your Inc	ome							12/15		
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	ır spouse is not filing w	ith you, do not inclu	ıde inforı	mati	on about your spo	use. If	more space is	needed,		
1.	Fill in your employment information.		Debtor 1	Debtor 2	Debtor 2 or non-filing spouse						
	If you have more than one job,	Employment status	■ Employed	■ Emplo	■ Employed						
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not er	☐ Not employed						
	employers.	Occupation		Directo	St. Paul's Lutheran Preschool						
	Include part-time, seasonal, or self-employed work.	Employer's name	Not Employed	St. Paul							
	Occupation may include student or homemaker, if it applies.	Employer's address									
		How long employed there?				8 Years					
Par	Give Details About Mo	nthly Income									
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any	ine, write \$0 in the	space.	Include your no	n-filing		
	u or your non-filing spouse have messpace, attach a separate sheet to		ombine the informatio	on for all e	emplo	oyers for that perso	n on th	e lines below. If	you need		
						For Debtor 1		Debtor 2 or -filing spouse			
2.		List monthly gross wages, salary, and commissions (bef deductions). If not paid monthly, calculate what the monthly			\$	0.00	\$	1,100.00			
3.	Estimate and list monthly over		3.	+\$	0.00	+\$	0.00				
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	0.00	\$	1,100.00			

Official Form 106I Schedule I: Your Income page 1

Debto	or 1	Thomas H. Davies, Jr.				Case	number (if kno	own)	19	-13029		
	Cor	by line 4 here		4.		For \$	Debtor 1	.00		or Debtor on-filing		
	-					Ψ		.00	Ψ		,100.00	_
		t all payroll deductions:		_								
	5a.	Tax, Medicare, and Social Secur	-	58		\$_		.00	\$		147.00	_
	5b. 5c.	Mandatory contributions for reting	•	5t 5d		\$_ \$.00	\$ \$		0.00	
	5d.	Required repayments of retirements	•	50		\$ _		.00 .00	э \$		0.00	_
	5e.	Insurance	ent fund loans	56		\$.00	Ψ \$		0.00	_
	5f.	Domestic support obligations		5f		\$_		.00	\$		0.00	
	5g.	Union dues		5(\$_		.00	\$		0.00	_
	5h.	Other deductions. Specify:			h.+	\$.00	+ \$		0.00	
6.	Add	d the payroll deductions. Add lines	5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	0	.00	\$		147.00)
7.	Cal	culate total monthly take-home pay	J. Subtract line 6 from line 4.	7.		\$	0	.00	\$		953.00)
	List 8a.	t all other income regularly received. Net income from rental property profession, or farm. Attach a statement for each proper receipts, ordinary and necessary be monthly net income.	and from operating a business, rty and business showing gross	8:	a.	\$	0	.00	\$		0.00	•
	8b.	Interest and dividends		81		\$ -		.00	\$		0.00	_
	8c.	regularly receive	ou, a non-filing spouse, or a depend child support, maintenance, divorce tt.	lent 80	C.	\$.00	\$		0.00	_
	8d.			80		\$.00	\$		0.00	_
	8e.	Social Security		86	e.	\$.00	\$		0.00	_
	8f.		alue (if known) of any non-cash assistance (if known) of any non-cash assistance (if known) and all the supplemental in the su	ance 8f	f.	\$	0	.00	\$		0.00)
	8g.	Pension or retirement income		80	g.	\$	0	.00	\$		0.00)
	8h.	Other monthly income. Specify:	Debtor's parents and wife's parents' contribution	8I	h.+	\$_	1,700	.00	+ \$		0.00	<u>)</u>
9.	Add	d all other income. Add lines 8a+8b	+8c+8d+8e+8f+8g+8h.	9.	. [\$	1,700	.00	\$		0.0	00
10	Cal	culate monthly income. Add line 7	ı line Q	10.	\$		1,700.00	1 ¢		953.00]_[s	2,653.00
		I the entries in line 10 for Debtor 1 and		10.	Ψ-		1,700.00	Τ Ψ		933.00	- Ψ –	2,033.00
	Incl othe Do	ude contributions from an unmarried per friends or relatives. not include any amounts already included.	the expenses that you list in Scheo partner, members of your household, y uded in lines 2-10 or amounts that are	our dep			•		•	n <i>Schedul</i>	le J. +\$	0.00
		te that amount on the <i>Summary of Sc</i>	line 10 to the amount in line 11. The hedules and Statistical Summary of C								\$	2,653.00
12	D	vou ovnost en incresse en de	o within the year often year file this	arm?							Combi	ined ly income
13.		No. Yes. Explain:	e within the year after you file this f	JIIII (